orm 3160-5 November 1983) Formerly 9-331)

UNITE STATES SUBMIT IN TRIPLICA (Other Instructions on Person and BUREAU OF LAND MANAGEMENT

Form approved. Budget Bureau No. 1004-0135 Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO. LC-064118

| SUNDRY NOTICES AND REPORTS ON WELLS (Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use "APPLICATION FOR PERMIT—" for such proposals.) | | | .M. Off CONS. COMMISSION O. BOX 1980 OBBS, NEW MEXICO 88240 | |
|--|----------------|---|--|--|
| OIL GAS OTHER | WIW | | 7. UNIT AGREEMENT NAME | |
| NAME OF OPERATOR | | | S. FARM OR LEASE NAME | |
| Plains Petroleum Operating Com | прану | 3 | Eva E. Blinebry | |
| ADDRESS OF OPERATOR 415 West Wall, Suite 1000, Midland, TX 79701 | | | 9. WHIL NO. | |
| LOCATION OF WELL (Report location clearly and in accordance with any State requirements. | | | #11 10. FIELD AND POOL, OR WILDCAT | |
| See also space 17 below.) At surface | | Teague 7RVSONGB | | |
| | - A T P | | 11. SEC., T., R., M., OR BLK. AND | |
| Unit P, 1300' FSL & 1240' FEL | | - 1000年 - 第二 数2 数2000年 - 2000年 - 200 | Sec 34, T23S, R37E | |
| PERMIT NO. : 15. ELEVATIONS (| Show whether p | F, RT, GR. etc.) | 12. COUNTY OR PARISH 13. STATE | |
| The state of the s | 50'' GR | and the second s | Lea NM | |
| Check Appropriate Box 1 | To Indicate I | Nature of Notice, Report, or | Other Data | |
| NOTICE OF INTENTION TO: | | A Company of the Comp | QUENT REPORT OF: | |
| TEST WATER SHUT-OFF PULL OR ALTER CAS | ING | WATER SHUT-OFF | BEPAIRING WELL | |
| FRACTURE TREAT MULTIPLE COMPLET | Ε | FRACTURE TREATMENT | ALTERING CASING | |
| SHOOT OR ACIDIZE ABANDON® | | - SHOOTING OR ACIDIZING | ABANDONMENT4 | |
| REPAIR WELL CHANGE PLANS | | (Other) | | |
| (Other) DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly suppressed work. If well is directionally drilled, give | | Completion or Recom | ts of muitiple completion on Well pletion Report and Log form.) | |
| tubing with 5000 gal pentol 200. | and the second | | | |
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| | | | | |
| I hereby certify that the foregoing is true and correct | | | | |
| SIGNED Down Allt | TITLE | Area Engineer | September 20, 19 | |
| This space for (ORIG. SGD. TOE'G. LARA APPROVED BY CONDITIONS OF APPROVAL. IF ANY: | TITLE | PETROLEUM ENGIN | EER DATE 10 21 94 | |